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SEG Mail Processing Section UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

FED 26 ZUDA

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

Washington, DC

SECTION 4(0), AND/OR

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OMB AP	PROVAL
OMB Number:	XXXX-XXXX
Expires:	June 27, 2005
Estimated average	age burden
hours per respons	onse 16.00

1428438

SEC USE ONLY			
Prefix	1	Serial	
DAT	E RECEIV	ED	

UNIFORM LIMITED OFFERING EXEMPT	ION
Name of Offering (check if this is an amendment and name has changed, and indicate char Issuance and Sale Limited Liability Company Common Units	oge.)
	ion 4(6)
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change Frontier Renewal LLC	
Address of Executive Offices: (Number and Street, City, State, Zip Code) 8400 East Crescent Parkway, Suite 600, Greenwood Village, Colorado 80111	Telephone Number (Including Area Code) (303) 521-5805 Telephone Number (Including Area Code)
Address of Principal Business Operations: (Number and Street, City, State, Zip Code) (if different from Executive Offices) SAME Brief Description of Business:	Telephone Number (Including Area Code)
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	(please specify): limited liability company
Actual or Estimated Date of Incorporation or Organization: Month Year	
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Re	FINANCIAL egulation D or Section 4(6), 17 CFR
230.501 et seq. or 15 U.S.C. 77d(6). When To File. A notice must be filed no later than 15 days ofter the first cale of securities in	

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	A. BASIC IDENT	IFICATION DATA					
2. Enter the information requested for the follow							
 Each promoter of the issuer, if the issuer has been organized within the past five years; 							
 Each beneficial owner having the power t securities of the issuer; 	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;						
 Each executive officer and director of corpo 	orate issuers and of o	corporate general and m	anaging partners	of partnership issuers; and			
Each general and managing partner of parts	nership issuers.						
Check Box(es) that Apply: ☐ Promoter ☐	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual) Williams, Eric G.							
Business or Residence Address (Number and	Street, City, State,	Zip Code)					
9742 East 3rd Avenue, Denver, Colorado 8023		•					
	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual) Malley, Michael J.							
Business or Residence Address (Number and	Street, City, State,	Zip Code)					
6405 Warrior's Run, Littleton, Colorado 801	=	, ,					
		Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Sweeney, David	Street City Street	7: C- 1-)	_	<u> </u>			
Business or Residence Address (Number and PO Box W, 5773 Woodway, Houston, TX 77		Zip Code)					
·		Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)		 -					
Mountain, Rocky							
Business or Residence Address (Number and	Street, City, State,	Zip Code)					
P.O. Box 300549, Austin, TX 78703							
Check Box(es) that Apply: ☐ Promoter ☐	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual) Urbina, Elias F.							
Business or Residence Address (Number and	Street, City, State,	Zip Code)					
500 N. Capital of Texas Highway, Bldg 3, Su	•						
	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Frontier Night Light I, LLC							
Business or Residence Address (Number and	Street, City, State,	Zip Code)		•			
PO Box 300549, Austin, Texas 78703							
Check Box(es) that Apply: ☐ Promoter ☐	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)	***						
ForeVista Frontier I, LP							
Business or Residence Address (Number and	Street, City, State,	Zip Code)					
500 N. Capital of Texas Highway, Bldg 3, Suite	e 120 Austin Texa	ns 78746					

					B. INF	ORMAT	ION ABO	UT OFF	ERING				
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes No □ ⊠					
Answer also in Appendix, Column 2, if filing under ULOE.								ا ب					
2. Wh	at is the m	iinimum i						_					\$ 0
2				***************************************			.,						_
													Yes No
													🛛 🗆
4. Ente	er the info	rmation r	equested f	or each pe	erson who	has been	or will be	paid or gi	ven, direc	tly or indi	rectly, any	commis-	
												ring. If a a state or	
stat	es, list the	name of	the broke	er or deale	r. If mor	e than fiv	e (5) pers	ons to be				of such a	
					rmation fo		ker or dea	ler only.				-	
Full Na	me (Last	name tirsi	t, 11 ingivi	duai)		N/A							
Dusing	a az Dasie	damas Alda	denga (Nive	nhan and G	Strant City	Ctoto 7	in Coda)		N//			<u>. </u>	
Busines	ss or Resid	ience Add	aress (Nur	noer and s	Street, City	y, State, Z	ip Code)		1977	`			
Name a	of Associa	and Dealer	Dl-			N/A		.				- .	
Name c	i Associa	lea Broke	r or Deale	r		N/A							
States i	n Whiah I	Damaan Lia	tad Uaa S	aliaitad as	Intends to	- Caliait I)ahaaara						
													A 11 Cr
(Ch	eck "All S	states" or	check ind	ividual Sta	ates)		•••••		••••••				All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT] [RI]	[NE] [SC]	[NV] [SD]	(NH) [TN]	[NJ] [XT]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
-	me (Last				[O1]	[41]	[VA]	[WA]	[""]	[141]	[44.1]	[110]	
1 411 114	ine (Busi		.,	Julij									
Busines	s or Resid	ience Ado	fress (Nur	nber and S	Street, City	v. State, Z	ip Code)						_,
	Business or Residence Address (Number and Street, City, State, Zip Code)												
Name o	f Associa	ted Broke	r or Deale	r						-			
States i	n Which I	erson Lis	ted Has S	olicited or	Intends to	Solicit F	urchasers					-	
													All States
(IL)	[IN]	[AZ] [lA]	[KS]	[KY]	[CO] [LA]	[ME]	[MD]	[MA]	[FL] [Mi]	[MN]	[HI] [MS]	[ID] [MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Na	me (Last	name first	, if indivi	dual)									
Busines	s or Resid	lence Add	iress (Nun	nber and S	Street, City	, State, Z	ip Code)			•			
Name o	f Associa	ted Broke	r or Deale	r			٠			_			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)								All States					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[N]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

J.

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total

	the securities offered for exchange and already exchanged.	Aggreg	gate	Amou	nt Already
	Type of Security	Offerir	ng Price	S	old
	Debt	\$		\$	
	Equity	\$	<u>0*</u>	<u>\$</u>	<u>0*</u>
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	\$		\$	
	Other (Specify)		\$		\$
		\$	0*	\$	0*
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchase securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases of the total lines. Enter "0" if answer is "none" or "zero."	S		•	
		Nur	mber	Dollar	regate Amount estors
		of Pur	rchases		
	Accredited Investors		6	\$	0*
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)			\$	
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelv (12) months prior to the first sale of securities in this offering. Classify securities by typ listed in Part C - Question 1.	e			
	To som t		e of		Amount
	Type of Offering		urity	£ 3	lold
	Rule 505			2	
	Regulation A			\$	
	Rule 504N/A			J	
4.	a. Furnish a statement of all expenses in connection with the issuance and distr securities in this offering. Excluded amounts relating solely to organization expenses of t information may be given as subject to future contingencies. If the amount of an exp known, furnish an estimate and check the box to the left of the estimate.	he issuer.	The	3	
	Transfer Agent's Fees			□s	
	Printing and Engraving Costs				
	Legal Fees			_	
	Accounting Fees			□ \$ _	
	Engineering Fees				
	Sales Commissions (specify finders' fees separately)			□ s_	
	Other Expenses (identify) Finders' fees				
	Total			□ \$	

^{*}The common were issued in exchange for services to be provided to the issuer for which <u>no</u> credit is made to the service providers capital account.

	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND	USE O	F PROCEE	DS	
- Question	1 and total expenses furnished in res	Tering price given in response to Part C ponse to Part C - Question 4.a. This suer."				\$
be used for furnish an payments li	each of the purposes shown. If the estimate and check the box to the le	amount for any purpose is not known, eft of the estimate. The total of the ceeds to the issuer set forth in response				
			1	Payments to Officers, Directors, & Affiliates		Payments 7
Salarie	s and fees (Management Fee)		. 🔲 S ,			\$
Purcha	se of real estate		. 🗆 s			\$
Purcha	se, rental or leasing and installation of t	machinery and equipment	. 🗆 s .			\$
Constr	uction or leasing of plant buildings and	facilities	. 🗆 s.			\$
this of	sition of other businesses (including the fering that may be used in exchange for r issuer pursuant to a merger)		. 🗆 \$			\$
	- ·	5)				\$
		,				
Other (specify) Venture Investments					П	\$
			. C] s		
Colum	n Totals		. 🗆 s	0		S
Total F	Payments Listed (column totals added)			□ \$		0
	D,	FEDERAL SIGNATURE				
following signature	constitutes an undertaking by the issue	ne undersigned duly authorized person. If the to furnish to the U.S. Securities and Exchange and accredited investor pursuant to paragraph	inge Con	nmission, up	on w	tule 505, the ritten request
Issuer (Print or Typ	pe)	Signature	Da	ite 22	ı	
Frontier Renewal	LLC	Z:W_	Fe	bruary <u>// </u>	, 2008	
	int or Type)	Title of Signer (Print or Type)				
Name of Signer (Pr		President				
Name of Signer (Pr Eric G. Williams		Fresident				

ATTENTION

Intentional misstatements or omissions of facts constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE				
1,	Is any party described in 17 CFR 230.252(c), of such rule?	(d), (e) or (f) presently subject to any of the disqualification provisions Yes No				
	5	See Appendix, Column 5, for state response.				
2.	The undersigned issuer hereby undertakes to Form D (17 CFR 239.500) at such times as re	furnish to any state administrator of any state in which this notice is filed, a notice on quired by state law.				
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.					
4.		suer is familiar with the conditions that must be satisfied to be entitled to the Uniform ate in which this notice is filed and understands that the issuer claiming the availability and that these conditions have been satisfied.				
	e issuer has read this notification and knows the dersigned duly authorized person	contents to be true an has duly caused this notice to be signed on its behalf by the				
Issuer (Print or Type) Frontier Renewal LLC		Signature Date February 22, 2008				
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				

President

Instruction:

Eric G. Williams

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear types or printed signatures.

5 2 3 Disqualification under State ULOE Type of security (if yes, attach and aggregate Intend to sell offering price Type of investor and explanation of to non-accredited amount purchased in State waiver granted) offered in state investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Equity -Nonaccredited Accredited **Common Units** Investors Amount Yes No State Yes No **Investors** Amount AL AK ΑZ AR CA CO X 2 \$0 0 \$0 X \$0 CT DE DC FL GA НΙ ID IL IN IA KS KY LA ME MD \$0 \$0 \$0 MA MI MN MS MO

APPENDIX

5 2 3 4 Disqualification under State Type of security ULOE Intend to sell and aggregate Type of investor and to non-accredited offering price (if yes, attach offered in state amount purchased in State explanation of investors in State (Part C-Item 2) waiver granted) (Part B-Item 1) (Part C-Item 1) (Part E-Item 1) Number of Number of Equity -Accredited Nonaccredited **Common Units** State Yes No Investors Amount Investors Amount Yes No MT NE NV NH NJ NM NY NC ND ОН OK OR PA RI SC SD TN TX X \$0 3 \$0 0 <u>S0</u> X UT VT VA WA WV WI WY PR

APPENDIX